122000375270

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
W2200095440

Office Use Only



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07/12/22--01019--003 **150.00

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2022 1 1 24 PH 12: 09

FLORIDA DEPARTMENT OF STATE Division of Corporations

July 21, 2022

MADINA BAHRETDINOVA 800 SE 4TH AVE STE 705 HALLANDALE BEACH, FL 33009

SUBJECT: BIOFULLERENE US LLC

Ref. Number: W22000095440

We have received your document for BIOFULLERENE US LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Karen Lovelace Regulatory Specialist II

Letter Number: 822A00016299

2022 AUS 24 PH II: 24

FROM: BIOFULLERENE US LLC NIKITA VASILIEV, MANAGING MEMBER 800 SE 4TH AVE, STE 705 HALLANDALE BEACH, FL 33009

TO: NEW FILING SECTION
DIVISION OF CORPORATIONS
P.O. BOX 6327
TALLAHASSEE, FL 32314

To whom it may concern.

Please see the attached documents for the company BIOFULLERENE US LLC. The Articles of Conversion was resent due to the mistake of the previous Articles of Conversion.

Previously the document was sent with check for \$150, which was cashed on July 14th. The check number is 1308.

H. Boumpe

Regards.

NIKITA VASILIEV, MANAGING MEMBER

FAX NUMBER: +1 305 647 6040

2022 AUG 24 PH II: 24 SECRETARY OF STATE

COVER LETTER

то:	New Filing Sec Division of Co				
CHD	JECT: BIOFULLE	ERENE US LLC			
SUD	JEC1	(Name of Resu	lting Florida Limi	nited Company)	
The o	enclosed Articles ness Entity" into	of Conversion, Article a "Florida Limited Lia	es of Organizat bility Compan	tion, and fees are submitted to convert an "ay" in accordance with s. 605.1045, F.S.	Other
Pleas	e return all corre	spondence concerning	this matter to:	:	
MAD	INA BAHRETDING	DVA		_	
		(Contact Person)			
MIAC	COUNTING			_	
		(Firm/Company)			
800	SE 4TH AVE STE		<u></u>	_	
		(Address)			
HAL	LANDALE BEACH	FL 33009			
	(0	City, State and Zip Code)	•		
	HRETDINOVA@C			_ 	
Е	-mail Address: (to be	e used for future annual rep	ort notifications))	
For	further informatio	on concerning this mat	ter, please call:	l:	
MAC	DINA BAHRETOIN	OVA	at (305) 610-2704 de) (Daytime Telephone Number)	
-	(Name of Conta	ct Person)	(Area Cod	de) (Daytime Telephone Number)	
Enc.	losed is a check f ars and drawn on	or the following amou a bank located in the	nt: (All checks United States)	s processed by this office must be payable i	n US
(\$25 & \$1	150.00 Filing Fees for Conversion 25 for Articles rganization)	☐\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filir and Certified Co		
	Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee,	ection Corporations 17		Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	2022 AU

INHS11 (7/17)

Articles of Conversion For "Other Business Entity"

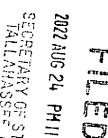
Into

Florida Limited Liability Company

The Articles of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: BIOFULLERENE US LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Liability Company (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of (Enter state, or if a non-U.S. entity, the name of the country)
on \(\frac{10/15/2020}{\text{(date of organization, formation or incorporation)}} \) 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
BIOFULLERENE US LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: (The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after the date this document is filed by the Florida Department of State.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
5. The plan of conversion has been approved in accordance with all applicable statutes.

6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to which such members are entitled under ss. 605.1006 and 605.1061-605.1072. F.S.



Signed this 6TH day of July	2022 .
Signature of Authorized Representative of Limit	ed Liability Company.
Signature of Authorized Representative:	Title: MANAGING MEMBER
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: H. Poucuus Printed Name: NIKITA VASILIEV	
Printed Name: NIKITA VASILIEV	Title: MANAGING MEMBER
Signature:	
Printed Name:	_ Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:	Til.
Printed Name:	_ True:
Signature:Printed Name:	Title:
Printed Name:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers or Officers have not been selected, an Inc.	Officer. corporator must sign.
If Florida General Partnership or Limited Liability Signature of one General Partner.	v Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
BIOFULLERENE US LLC (Must contain the words "Limited Liability	Company "L.L.C." or "LLC.")
ARTICLE II - Address:	ncipal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
3571 FAR WEST BLVD 3034 AUSTIN, TX 78731	3571 FAR WEST BLVD 3034 AUSTIN, TX 78731
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	Office, & Registered Agent's Signature: ered Agent. You must designate an individual or another
The name and the Florida street address of the re	egistered agent are:
ALEKSEI TARTACHNYI	
Name	
800 SE 4TH AVE 705	
Florida street address (P.O.	
HALLANDALE BEACH	FL ³³⁰⁰⁹
City	Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)



ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability

Title:	Name and Address:		
"AMBR" = Authorized Member			
"MGR" = Manager AMBR	NIKITA VASILIEV		
	3571 FAR WEST BLVD 3034		
	AUSTIN, TX 78731		
AMBR	TIMOFEY SKRYABIN		
	3571 FAR WEST BLVD 3034		
	AUSTIN, TX 78731		
AMBR	VASILIJS LEVCISINS		
	3571 FAR WEST BLVD 3034		
	AUSTIN, TX 78731		
MGR	ALEKSEI TARTACHNYI		
	3571 FAR WEST BLVD 3034		
	AUSTIN, TX 78731		
(Use attachment if necessary)			
LE V: Other provisions, if any.			
required signature:			
Signature of a member or	an authorized representative of a member with section 605,0203 (1) (b), Florida Statutes. I am aware		

as provided for in s.817.155, F.S.

NIKITA VASILIEV

Typed or printed name of signee

Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent sation and Designation of Registered Ages \$ 5.00 Certificate of Status (Optional) TALLAHASSEE, F. \$ 30.00 Certified Copy (Optional)